	None	کر	best	D. G	rlove	Office (if ann	licable)	39 Ces	Cofe	Xon	istrict (if applic	able)
(Mailing E-Mail	2	dress (include city ress	and zip code)	all:	telo	Cov	~	○ Tel	ephone No.		
	Selec	App	propriate Box(es	CANDIDAT	É DPAC	□BAG	POL PRT	Y INDE	XPAME	NDED AN	NNUAL FILING	3
	A		Report #1 –	- Due Marc	h 29, 200 : Period:		5 — Mar. 24,	2005			2005	.=\
-			Report #2 -	- Due May 🤄	31, 2005 Period:	. Mar. 25, 20	105 May 26	, 2005		•	MAR 18	JAIK
			Report #3 D	ue — July	15, 2005 Period:	May 27, 20	05 — June 30), 2005		For Office Us	e Only	LERK
			-			•					Ģ W Çuppelati	v/o
:		ب	CONTI	RIBUTIONS	SUMM	ARY				This Period	From Beg of Report #1 throug	ginniı t Peri
,					•		•		,	MIS VERIOU	of This Reporting	9
		.1.	Total Monetary	Contributions	Received in	Excess of \$	100		—	10	معرا	
	•	2.	Total Monetary	Contributions	Received of	f \$100 or Le	ss ;			B	Ø	<u></u>
		:	- -			1	his Period	Cumulative Beginning Report Peri Through Er This Repor Reriod	of od #1 id of			
		3.	Total Amount Received (Add Lines 1 a		Contributio	ns 7		, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		(
		4.	Total Value of Excess of \$10	In Kind Contrib	outions Rece	eived in —	0	+ 6	3/			
	· · ·	٠	٠.			EXPE	NSES SU	MMARY	. •			
		5.	Total Monetar	y Expenses Pa	id in Excess	of \$100			-,			
			Total Monetary Total Amount (Add Lines 5 a	of All Moneta			· · · · · · · · · · · · · · · · · · ·					·
	٠.,	8.	Total Value of of \$100		ses in Exces		·					
	٠.		1 6	eclare Under	Penalty of	A Perjury Th	FFIRMAT at the Fore	ION going is Tru	e and Co	rect.	,	

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Robert D. Glover has begas Cited anneil words
Name (print)
Office (1) applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF E	ACH TION	AMOUNT C	F EACH OUTION	CHECK IF Lo	HERE AN
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Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	6	CODE	·	
Office expenses	E	A	,	
Expenses related to volunteers	8	В		
Expenses related to travel	8	С		
Expenses related to advertising	X	D		:
Expenses related to paid staff	Ø	E		
Expenses related to consultants		F		· .
Expenses related to polling	0	G		,
Expenses related to special events		Н		
** Goods and services provided in kind for v have been paid	which money would otherwise	1	2005 MAR	ALIO 032k
Other miscellaneous expenses	6	J	8	CLERK
Expenses related to NRS 294A.160 (Disposi	tion of Unspent Contributions)	K	Б: 33	

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

PAGE 3 OF

CAMPAIGN E	XPENSES	Robert D. Glove	Report Period #
has (ecres	aty Cancell Usoch &)
Name (print)	()	Office (if applicable)	District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
NIA	Ma	NA	MA
		N	
			2005
			RECEIN DITY CL
			EIVED CLERK 8 A 18: 34

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